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REQUEST FOR WITHDRAWAL TORNEY OR AGENT

Application Number	09/133856		
Filing Date	08/13/98		
First Named Inventor	James Johnson		
Group Art Unit	Unassigned		
Examiner Name	Unassigned		
Attorney Docket Number	10172-9013-014		

TO: A	To: Assistant Comm	issioner for Patents
	Washington, DC	20231

I hereby apply to withdraw as attorney or agent for the above identified application.

The reasons for this request are:

BUSINESS WAS TRANSFERRED TO ILLINOIS TOOL WORKS, INC.

 The correspondence address is NOT affected by this withdrawal. Change the correspondence address and direct all future correspondence to: 									
Custom	ner Numbe	er	CORRESPONDE	NCE ADDRESS	Place Customer Bar Code Label				
Firm <i>or</i> Individua	al Name	ILLINOIS TO	OOL WORKS, I	INC.		· · · · · · · · · · · · · · · · · · ·			
Address City		3600 W. LAKE AVENUE GLENVIEW State IL			ZIP 60	0025			
Country Telephone		COOK Fax							
This request is enclosed in triplicate.									
Name	ROBERT S. BEISER OF MICHAEL, BEST & FRIEDRICH								
Signature	Robert & Brian								
Date	DECE	GRAH	1999						
NOTE: W	ithdrawal	is effective when	approved rather th	han when received.	CHE BE NO	1700			

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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